## **INITIAL APPLICATION DATA SHEET**

**Application Information** 

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Title:: Reinforced cue stick

Attorney Docket Number:: 57471/03-380

Request for Early Publication:: No

Request for Non-Publication:: Yes

Suggested Drawing Figure::

Total Drawing Sheets:: 2

Small Entity?::

Petition Included?:: No

**Applicant Information** 

Applicant One Authority Type:: Inventor

Primary Citizenship Country:: USA

Status:: Full Capacity

Given Name:: Michael

Family Name:: Nally

City of Residence:: Ridgewood

State or Province of Residence:: NJ

Country of Residence:: USA

Street of mailing address:: 300 Brookmere Court

City of mailing address:: Ridgewood

State or Province of mailing address:: NJ

Country of mailing address:: USA

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Postal or Zip Code of mailing address:: 07450

Applicant Two Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Mark

Family Name:: Zehfuss

City of Residence:: Morristown

State or Province of Residence:: NJ

Country of Residence:: USA

Street of mailing address:: 1 Ashley Ct.
City of mailing address:: Morristown

State or Province of mailing address:: NJ

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 07960

Applicant Three Authority Type:: Inventor

Primary Citizenship Country:: USA

Inventor Given Name:: David

Family Name:: Rossi

City of Residence:: Newton

State of Residence:: NJ

Country of Residence:: USA

Street of Mailing Address:: 15 Hidden Valley Road

City of Mailing Address:: Newton

State or Province of mailing address:: NJ

Country of Mailing Address:: USA

Postal or Zip Code of mailing address:: 07860

Corresponden	ce Information				
Correspondence Customer No.::		22206			
Representative	e Information				
Representative Customer Number::			22206		
Domestic Prio	rity Information				
Application:	Continuity Type::		Parent Application::	Parent Filing::	
				MM/DD/YY	

## Foreign Priority Information

Country::	Application	Filing Date::	Priority Claimed::
	Number::		
			Yes or No

## **Assignee Information**

Assignee Name::

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